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**To:**

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**FROM:** Charles D. Holland**DATE:** February 5, 2004

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| Number of pages with cover page: | 5 |
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**Comments:**

Atty Docket No.: 282172000902  
Inventor: Derek J. HEI et al.  
Application No.: 10/051,976  
Filing Date: January 16, 2002

Title: METHODS AND DEVICES FOR THE REMOVAL OF PSORALENS FROM  
BLOOD PRODUCTS

**Documents Filed:**

1. Transmittal (1 page)
2. Fee Transmittal (1 page with copy)
3. Notice of Appeal (1 page)

PTO/SB/2: (08-03)

Approved for use through 07/31/2006. OMB 01-51-0031

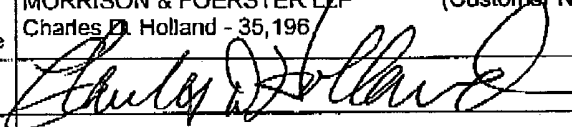
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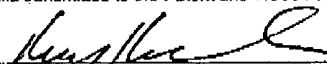
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| <b>TRANSMITTAL<br/>FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 10/051,976             |              |
|  | Filing Date          | January 16, 2002       |              |
|  | First Named Inventor | Derek J. HEI           |              |
|  | Art Unit             | 1651                   |              |
|  | Examiner Name        | D. Naff                |              |
| Total Number of Pages In This Submission   | 4                    | Attorney Docket Number | 282172000902 |

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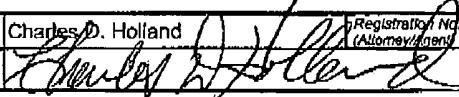
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| Firm or Individual name                    | MORRISON & FOERSTER LLP (Customer No. 25226)<br>Charles D. Holland - 35,196         |
| Signature                                  |  |
| Date                                       | February 5, 2004  |

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|--|---|--|------------------|--|----------|-----------------|----------|-----------------|----------|----------|----------|----------|----------|------|-----|--------------------|----|-------------------------------------|-----|------|-----|-------------------|----|--|-----|------|-----|------------------|-----|---------------------------|-----|------|-------|--------------------|-------|--|-----|------|------|------------------------|------|--|--|--------------|--------|--------------|--------|---|----------|----------|----------|----------|----------|--|----|------|-----|------------------------|-----|---|----|------|-----|-----------------------------------|-----|--|-----|------|-------|---------------------------------------|-----|---|----|------|-------|--|-------|--|----|------|-----|--|-----|------------------|-------|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>   |   | <b>Complete if Known</b>   |                  |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |   | Application Number   | 10/051,976       |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|  |   | Filing Date  | January 16, 2002 |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|  |   | First Named Inventor   | Derek J. HEI     |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|  |   | Examiner Name  | D. Naff          |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|  |   | Art Unit   | 1651             |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>330.00</b>  |   | Attorney Docket No.  | 282172000902     |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>METHOD OF PAYMENT</b> (check all that apply)  |   | <b>FEE CALCULATION</b> (continued)   |                  |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: <b>03-1952</b><br>Deposit Account Name: <b>Morrison &amp; Foerster LLP</b><br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  |   | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>420</td> <td>2252</td> <td>210</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>950</td> <td>2253</td> <td>475</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,400</td> <td>2254</td> <td>740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>2,010</td> <td>2255</td> <td>1,005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>330</td> <td>2401</td> <td>165</td> <td>Notice of Appeal</td> <td>30.00</td> </tr> <tr> <td>1402</td> <td>330</td> <td>2402</td> <td>165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>290</td> <td>2403</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2492</td> <td>55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>1453</td> <td>1,330</td> <td>2453</td> <td>665</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>1,330</td> <td>2501</td> <td>665</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502</td> <td>480</td> <td>2502</td> <td>240</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503</td> <td>640</td> <td>2503</td> <td>320</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Processing fee under 37 CFR 1.17(q)</td> <td></td> </tr> <tr> <td>1808</td> <td>180</td> <td>1808</td> <td>180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>1809</td> <td>770</td> <td>2809</td> <td>385</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>1810</td> <td>770</td> <td>2810</td> <td>385</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>1801</td> <td>770</td> <td>2801</td> <td>385</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> </tbody> </table> |                  | Large Entity   |          | Small Entity    |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130 | 2051               | 65 | Surcharge - late filing fee or oath |     | 1052 | 50  | 2052              | 25 | Surcharge - late provisional filing fee or cover sheet |     | 1053 | 130 | 1053             | 130 | Non-English specification |     | 1812 | 2,520 | 1812               | 2,520 | For filing a request for <i>ex parte</i> reexamination |     | 1804 | 920* | 1804                   | 920* | Requesting publication of SIR prior to Examiner action   |  | 1805         | 1,840* | 1805         | 1,840* | Requesting publication of SIR after Examiner action |          | 1251     | 110      | 2251     | 55       | Extension for reply within first month |    | 1252 | 420 | 2252                   | 210 | Extension for reply within second month |    | 1253 | 950 | 2253                              | 475 | Extension for reply within third month |     | 1254 | 1,400 | 2254                                  | 740 | Extension for reply within fourth month |    | 1255 | 2,010 | 2255   | 1,005 | Extension for reply within fifth month |    | 1401 | 330 | 2401   | 165 | Notice of Appeal | 30.00 | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2492 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1808 | 180 | 1808 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity   |   | Small Entity   |                  | Fee Description  | Fee Paid |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code   | Fee (\$)  | Fee Code   | Fee (\$)         |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051   | 130   | 2051   | 65               | Surcharge - late filing fee or oath  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052   | 50  | 2052   | 25               | Surcharge - late provisional filing fee or cover sheet                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053   | 130   | 1053   | 130              | Non-English specification  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812   | 2,520   | 1812   | 2,520            | For filing a request for <i>ex parte</i> reexamination                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804   | 920*  | 1804   | 920*             | Requesting publication of SIR prior to Examiner action                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805   | 1,840*  | 1805   | 1,840*           | Requesting publication of SIR after Examiner action                        |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251   | 110   | 2251   | 55               | Extension for reply within first month                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252   | 420   | 2252   | 210              | Extension for reply within second month                                    |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253   | 950   | 2253   | 475              | Extension for reply within third month                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254   | 1,400   | 2254   | 740              | Extension for reply within fourth month                                    |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255   | 2,010   | 2255   | 1,005            | Extension for reply within fifth month                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401   | 330   | 2401   | 165              | Notice of Appeal   | 30.00    |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402   | 330   | 2402   | 165              | Filing a brief in support of an appeal                                     |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403   | 290   | 2403   | 145              | Request for oral hearing   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451   | 1,510   | 1451   | 1,510            | Petition to institute a public use proceeding                              |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452   | 110   | 2492   | 55               | Petition to revive - unavoidable   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453   | 1,330   | 2453   | 665              | Petition to revive - unintentional   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501   | 1,330   | 2501   | 665              | Utility issue fee (or reissue)   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502   | 480   | 2502   | 240              | Design issue fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503   | 640   | 2503   | 320              | Plant issue fee  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460   | 130   | 1460   | 130              | Petitions to the Commissioner  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807   | 50  | 1807   | 50               | Processing fee under 37 CFR 1.17(q)  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1808   | 180   | 1808   | 180              | Submission of Information Disclosure Stmt                                  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021   | 40  | 8021   | 40               | Recording each patent assignment per property (times number of properties) |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809   | 770   | 2809   | 385              | Filing a submission after final rejection (37 CFR 1.129(a))                |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810   | 770   | 2810   | 385              | For each additional invention to be examined (37 CFR 1.129(b))             |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801   | 770   | 2801   | 385              | Request for Continued Examination (RCE)                                    |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802   | 900   | 1802   | 900              | Request for expedited examination of a design application                  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>770</td> <td>2001</td> <td>385</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002</td> <td>340</td> <td>2002</td> <td>170</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>530</td> <td>2003</td> <td>265</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>770</td> <td>2004</td> <td>385</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (1)</b> (\$) <b>0.00</b></p> |   | Large Entity   |                  | Small Entity   |          | Fee Description | Fee Paid | Fee Code        | Fee (\$) | Fee Code | Fee (\$) | 1001     | 770      | 2001 | 385 | Utility filing fee |    | 1002                                | 340 | 2002 | 170 | Design filing fee |    | 1003   | 530 | 2003 | 265 | Plant filing fee |     | 1004                      | 770 | 2004 | 385   | Reissue filing fee |       | 1005   | 160 | 2005 | 80   | Provisional filing fee |      | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>86</td> <td>2201</td> <td>43</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>290</td> <td>2203</td> <td>145</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>86</td> <td>2204</td> <td>43</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b> (\$) <b>0.00</b></p> |  | Large Entity |        | Small Entity |        | Fee Description                                     | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202                                   | 18 | 2202 | 9   | Claims in excess of 20 |     | 1201                                    | 86 | 2201 | 43  | Independent claims in excess of 3 |     | 1203                                   | 290 | 2203 | 145   | Multiple dependent claim, if not paid |     | 1204                                    | 86 | 2204 | 43    | ** Reissue independent claims over original patent |       | 1205                                   | 18 | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity   |   | Small Entity   |                  | Fee Description  | Fee Paid |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code   | Fee (\$)  | Fee Code   | Fee (\$)         |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001   | 770   | 2001   | 385              | Utility filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002   | 340   | 2002   | 170              | Design filing fee  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003   | 530   | 2003   | 265              | Plant filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004   | 770   | 2004   | 385              | Reissue filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005   | 160   | 2005   | 80               | Provisional filing fee   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity   |   | Small Entity   |                  | Fee Description  | Fee Paid |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code   | Fee (\$)  | Fee Code   | Fee (\$)         |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202   | 18  | 2202   | 9                | Claims in excess of 20   |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201   | 86  | 2201   | 43               | Independent claims in excess of 3  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203   | 290   | 2203   | 145              | Multiple dependent claim, if not paid                                      |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204   | 86  | 2204   | 43               | ** Reissue independent claims over original patent                         |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205   | 18  | 2205   | 9                | ** Reissue claims in excess of 20 and over original patent                 |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>Other fee (specify)</b><br>*Reduced by Basic Filing Fee Paid  |   | <b>SUBTOTAL (3)</b> (\$) <b>30.00</b>  |                  |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| **or number previously paid, if greater; For Reissues, see above   |   |  |                  |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBMITTED BY</b> (Complete if applicable)   |   |  |                  |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Name (Print/Type)  | Charles D. Holland  | Registration No. (Attorney/Agent)  | 35,196           |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Signature  |  | Telephone  | (650) 813-5832   |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|  |   | Date   | February 5, 2004 |  |          |                 |          |                 |          |          |          |          |          |      |     |                    |    |                                     |     |      |     |                   |    |  |     |      |     |                  |     |                           |     |      |       |                    |       |  |     |      |      |                        |      |  |  |              |        |              |        |   |          |          |          |          |          |  |    |      |     |                        |     |   |    |      |     |                                   |     |  |     |      |       |                                       |     |   |    |      |       |  |       |  |    |      |     |  |     |                  |       |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

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| <b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b> |  | <b>Docket Number (Optional)</b><br>282172000902 |  |
| In re Application of<br>Derek J. HEI et al.  |  |   |  |
| Application Number<br>10/051,976   |  | Filed<br>January 16, 2002                       |  |
| For <b>METHODS AND DEVICES FOR THE REMOVAL OF PSORALENS FROM BLOOD PRODUCTS</b>            |  |   |  |
| Art Unit<br>1651   |  | Examiner<br>D. Naff                             |  |

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 330.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ \_\_\_\_\_

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No.03-1952. I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

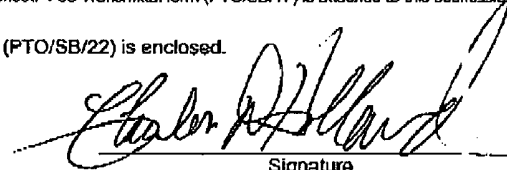
I am the

☐ applicant /inventor

☐ assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☐ attorney or agent of record.  
Registration number \_\_\_\_\_

☒ attorney or agent acting under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a), 35,196

  
Signature  
Charles D. Holland  
Typed or printed name  
(650) 813-5832  
Telephone number  
February 5, 2004  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9307, on the date shown below.

Dated: 2/5/04

Signature:  (Kerry C. Keenan)